

## **“A Study Perspective of Students from Higher Education Institute towards is the Swach Bharat Abhiyan”**

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### **Abstract**

A non-experimental descriptive survey design was used to assess the knowledge of student towards ‘Swach Bharat Abhiyan’. Study was conducted student from higher education institute Shivaji University Kolhapur.

### **Keyword**

Health education, personal hygiene, clean India.

### **Introduction**

“The rural sanitation programme in India was introduced in the year 1954 as a part of the First Five Year Plan of the Government of India. The 1981 Census revealed rural sanitation coverage was only 1%. The International Decade for Drinking water and Sanitation during 1981-90, began giving emphasis on rural sanitation. Government of India introduced the Central Rural Sanitation Programme (CRSP) in 1986 primarily with the objective of improving the quality of life of the rural people and also to provide privacy and dignity to women. From 1999, a “demand driven” approach under the “Total Sanitation Campaign” (TSC) emphasized more on Information, Education and Communication (IEC), Human Resource Development (HRD), Capacity Development activities to increase awareness among the rural people and generation of demand for sanitary facilities. This enhanced people’s capacity to choose appropriate options through alternate delivery mechanisms as per their economic condition. Financial incentives were provided to Below Poverty Line (BPL) households for construction and usage of individual household latrines (IHHL) in recognition of their achievements.

To generate awareness on sanitation, the Nirmal Gram Puraskars (NGP) were awarded to recognise the achievements and efforts made at the GP level in ensuring full sanitation coverage and achieving other indicators of open defecation free GPs. While the award gained popularity in bringing about a desire in the community for attaining Nirmal Status, there have been issues of sustainability in some awardee GPs.

The “Nirmal Bharat Abhiyan” (NBA) the successor programme of the TSC, was launched from 1.4.2012. The objective was to accelerate the sanitation coverage in the rural areas so as to comprehensively cover the rural community through renewed strategies and saturation approach. Nirmal Bharat Abhiyan (NBA) envisaged covering the entire community for saturated outcomes with a view to create Nirmal Gram Panchayats. Under NBA, the Incentives for IHHLs were enhanced and further focussed support was obtained from MNREGA. However there were implementation difficulties in convergence of NBA with MNREGA as funding from different sources created delays.

To accelerate the efforts to achieve universal sanitation coverage and to put focus on sanitation, the Prime Minister of India launched the Swachh Bharat Mission on 2nd October, 2014. The Mission Coordinator shall be Secretary, Ministry of Drinking Water and Sanitation (MDWS) with two Sub-Missions, the Swachh Bharat Mission (Gramin) and the Swachh Bharat Mission (Urban), which aims to achieve Swachh Bharat by 2019, as a fitting tribute to the 150th Birth Anniversary of Mahatma Gandhi, which in rural areas shall mean improving the levels of cleanliness in rural areas through Solid and Liquid Waste Management activities and making Gram Panchayats Open Defecation Free (ODF), clean and sanitized. The Mission shall strive for this by removing the bottlenecks that were hindering the progress, including partial funding for Individual Household Latrines from MNREGS, and focusing on critical issues affecting outcomes. 1.5 The Guidelines of SBM (G) and the provisions hereunder are applicable with effect from 02.10.2014.

### **GOAL**

To achieve “Swachh Bharat” by 2019.

### **OBJECTIVES**

The main objectives of the SBM (G) are as under:

a) Bring about an improvement in the general quality of life in the rural areas, by promoting cleanliness, hygiene and eliminating open defecation. b) Accelerate sanitation coverage in rural areas to achieve the vision of Swachh Bharat by 2nd October 2019. c) Motivate Communities and Panchayati Raj Institutions to adopt sustainable sanitation practices and facilities through awareness creation and health education. d) Encourage cost effective and appropriate technologies for ecologically safe and sustainable sanitation. e) Develop wherever required, Community managed sanitation systems focusing on scientific Solid & Liquid Waste Management systems for overall cleanliness in the rural areas.

### **STRATEGY**

The focus of the Strategy is to move towards a ‘Swachh Bharat’ by providing flexibility to State Governments, as Sanitation is a state subject, to decide on their implementation policy and mechanisms, taking into account State specific requirements. This is focused to enable States to develop an Implementation Framework that can utilize the provisions under the Mission effectively and maximize the impact of the interventions. The Government of India’s role would be to complement the efforts of the State Governments through the focused programme being given the status of a Mission, recognizing its dire need for the country. It is suggested that Implementation Framework of each State be prepared with a road map of activities covering the 3 important phases necessary for the Programme: (i) Planning Phase (ii) Implementation Phase (iii) Sustainability Phase Each of these phases will have activities that need to be specifically catered for with concrete Plans of Action, which shall need specific preparation and planning. 3.2 A schematic representation of the SBM Programme Implementation Diagram is represented below as an illustrative model. 3.3 In the context of the various interventions identified

in the Implementation Framework, certain approaches can be considered. The suggested approach would be to adopt the Community led and Community Saturation approaches focusing heavily on collective behavioral change. Emphasis is to be placed on awareness generation, triggering behaviour change and demand generation for sanitary facilities in Houses, Schools, Anganwadis, and places of Community congregation, and for Solid and Liquid Waste Management activities. Focus will be on Inter Personal Communication (IPC), especially of triggering of demand and use of toilets through social and behavioral change communication and house to house interventions. Since Open Defecation Free villages cannot be achieved without all the households and individuals conforming to the desired behavior of toilet use, every day and every time, community action and generation of peer pressure on the outliers are the key. Therefore behavior change communication should focus on triggering entire communities. Community based monitoring and vigilance committees are essential to create peer pressure. Delivery mechanism” [1]

**Jain S.C. (2007:6)** in *the* study regarding the verification process notes that during the year 2006, verification process was carried out in GPs of Satara (203 GPs) and Nanded (40 GPs) Districts by Action for Food Production (AFPRO). As part of the verification process, visits to each village were carried out by multi-disciplinary team.

In conclusion, the author comments “Nirmal Gram Purraskar’ award provides an ideal opportunity for facilitating better living conditions among the rural communities. The another also make a suggestions that the incentive offered should not be seen from a short-term angle, but as a motivational instrument by all the institutions involved in promotion of TSC. The State can also take appropriate measures at the district levels to check the application from panchyats so as to avoid high rate of rejection which has been experienced in the recent verification process to avoid loss of enthusiasm as well as the huge cost involved in the whole process.” The programme can get a boost if proper facilities are created through awareness creation and promotion of appropriate mechanical option with financial arrangement at the local level. For achieving sustainability of the process initiated, emphasis should always be on achieving behavioral changes rather than on the creation of infrastructure to gain from opportunity offered by the awards [2]

**Das Keshb (2006)** in his study has observed that the rural sanitation programme in Maharashtra has achieved impressive coverage since - 1996 under the centrally sponsored Rural Sanitation Programme. He has found that even through Maharashtra efforts at rural sanitation have been laudable, much needs to be achieved through greater participation and awareness generation in people. In terms of technology option, affordability issue needs key emphasis. He opined that an inclusive approach to rural sanitation would be most effective. [3]

Govt. of India, in its website (2007:1) observed that India cannot achieve real development if majority of its people particularly live in an unhealthy and unclean surroundings due to lack of access to safe water

and sanitation. Poor water and sanitation facilities have many other serious repercussions. A direct link exists between water, sanitation, health, and nutrition human well-being. Consumption of contaminated drinking water, improper disposal of human excreta, lack of personal, food hygiene, and improper disposal of solid and liquid waste have been major causes of many diseases in India and it is estimated that around 30 million people suffer from water related illnesses. Children particularly girls and women are the most affected. Many children, particularly girls drop out of school and are denied their right to education because they are busy fetching water or are deterred by the lack of separate and decent, sanitation facilities in schools. Women often suffer from lack of privacy, harassment and need to walk large distances to find a suitable place for defecation in the absence of household appropriate neighborhood toilet facilities. Poor farmers and wage earners are less productive due to illness and national economies suffer. Without safe water and sanitation, sustainable development is impossible.[4]

#### **Statement of Research Problem:**

The proposed study aims to understand how far the ‘Swachh Bharat Abhiyan’ Implementation, knowledge of student towards ‘Swachh Bharat Abhiyan’. Study was conducted student from higher education institute Shivaji University Kolhapur.

#### **Objectives:**

The objectives of the study would be as under.

1. To study take a brief glance on ‘swachh bharat abhiyan’.
2. To study the knowledge, attitude away the student from higher education.

#### **Research Methodology:**

The following methodological procedures will be adopted for the proposed study.

#### **Type of Research Design:**

Descriptive research design would be adapted for the proposed study.

Purposive sampling method would be used for student higher education for the shivaji university Kolhapur. They are 30 interview scheduled.

#### **Tools and Techniques of data collection:**

For the collection of the data personal observation and interview techniques will be used. The researcher will collect primary data with the help of interview scheduled.

The secondary data will be collected as well as from books, research report, journals, Govt. documents, and reports.

#### **Conclusion**

Students are Sanitation, hygiene and cleanliness were made part of the consousness of the respondent. The highest influences of swine flu and tuberculosis diseases because health education programm arranged university. The Swachh Bharat Abhiyan not any student identification for the target achievement, goals and objectives. Today’s university arranged

deworming tab distribution camp, H1N1 vaccination and Hepatitis vaccine give the students. This time not completely open defecation because not the strict rule of the government. The student not sanitation please, arranged sanitation pledge camp. The Knowledge about SWA in terms of village all round cleanliness human health and personal hygiene also has been found among the respondent. This is evidenced in the response to the causes of water pollution and ways to keep the homes and surroundings clean every days. The students not recognized water born disease, air born disease, the health education importance give. Swach bharat abhiyan is the ideal scheme, but proper implementation. Swach Bhatrat Abhiyan is participate everyone to the succeed program after nice and healthy India. Major student think about not serious the implement progamm are not success. The high percentage diseases are uncleanness, but not see to the serious. The sanitation program success is definitely one of the eradications diseases.

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